POLICY P 03-a

DELIVERY OF PATIENT CARE REPORTS TO RECEIVING FACILITIES

May 2, 2003

Background:

The Bureau of Emergency Management has been asked to clarify the requirements related to EMS providers supplying EMS run sheets with patient care information to a receiving facility upon delivery of a patient. Current rule 157.11(7) addresses this issue by stating that it is a requirement of an EMS Provider to supply "all relevant patient care information to a receiving facility upon delivery of a patient," however, this rule does not specify that the relevant information be in writing. However, current rule 157.36 (b) specifically requires that the patient care information be in the form of "accurate, complete and…clearly written patient care reports."

Rule References:

§157.11(l) Responsibilities of the EMS provider. During the license period the provider's responsibilities shall include:

(7) assuring that all relevant patient care information is supplied to receiving facilities upon delivery of patients.

157.36(b) The department may suspend or decertify an EMS certificant or suspend or revoke a licensed paramedic for, but not limited to, the following reasons:

(3) failing to make accurate, complete and/or clearly written patient care reports documenting a patient's condition upon arrival at the scene, the prehospital care provided, and patient's status during transport, including signs, symptoms, and responses during duration of transport.

Rule Interpretation Policy:

The intent of 157.11(1)(7) is to require the EMS provider to assure that an accurate, complete and clearly written or computer generated patient care report be provided to the receiving facility, when operationally feasible, at the time of delivery of the emergency patient to the facility. If the EMS staff is in a response-pending status, the written or computer generated report shall be delivered to the emergency department at the next earliest opportunity.

The report should document, at a minimum, the patient's condition upon arrival at the scene; the prehospital care provided; the patient's status during transport, including signs, symptoms, and responses during the transport; the call initiation time; dispatch time; scene arrival time; scene departure time; and hospital arrival time.

Failure to provide a written or computer-generated patient care report as described to the receiving facility upon patient delivery could subject the provider and/or personnel to disciplinary action.

Kathryn C. Perkins, RN, MBA Chief, Bureau of Emergency Management Policy signature dated May 2, 2003